SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

**Proposed Construction:** 

П

Other: (explain)

#### APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received)

SEP 17 2021

Bayfield Co. INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Permit #: Date: **Amount Paid** Refund:

Height: 24' 6"

TYPE OF PERMIT REQUESTED→ □ LAND USE □ SANITARY □ PRIVY □ CONDITIONAL USE □ SPECIAL USE □ B.O.A. ☐ OTHER Owner's Name: Mailing Address: City/State/Zip: Telephone: 1162 LORPAINE JOE ELMGRET CARVEN 55315 Address of Property: City/State/Zip: Cell Phone: 6/2-799.394 48025 OLO GRADE 5482 CABLE WI Contractor: Contractor Phone: Plumber: Plumber Phone: Pill 507-273-8/2 PLUTABINE 715-682-6050 Agent Mailing Address (include City/State/Zip): Authorized Agent: (Person Agent Phone: Written Authorization Attached 507-273.8127 CABL ☐ Yes ☐ No Tax ID# (4-5 digits) Recorded Deed (i.e. # assigned by Register of Deeds) PROJECT Legal Description: (Use Tax Statement) LOCATION 16348 Document #: Gov't Lot Vol & Page Lot(s) CSM Lot(s) No. Block(s) No. Subdivision: 1/4, 1/4 8 Town of: Lot Size Acreage Section \_\_\_\_\_\_\_, Township GRANDUIEN 122 000 SF 7 8  $\hfill \square$  Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Distance Structure is from Shoreline: Is Property in Are Wetlands Creek or Landward side of Floodplain? If yes---continue feet Floodplain Zone? Present? ✓ Shoreland → ☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage □ Yes Yes Distance Structure is from Shoreline: ✓ No □ No If yes---continue 76 feet ☐ Non-Shoreland

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary Sy- Is on the propert	stem	Water
_ = _ = _	✓ New Construction	☐ 1-Story	☐ Seasonal	□ 1	☐ Municipal/City		☐ City
٠	☐ Addition/Alteration	☐ 1-Story + Loft	Year Round	□ 2	(New) Sanitary Specify Type	oe:	<b>∠</b> Well
\$400,000	☐ Conversion	∠ 2-Story		<b>⊿</b> 3	☐ Sanitary (Exists) Specify Ty	pe:	
	☐ <b>Relocate</b> (existing bldg)	☐ Basement			☐ Privy (Pit) or ☐ Vaulted		
_	☐ Run a Business on	☑ No Basement		□ None	☐ Portable (w/service contract	:)	
	Property	☑ Foundation			☐ Compost Toilet		
					□ None		
Eviation Standard	/:C						
Existing Structur	e: (if permit being applied fo	or is relevant to it)	Length:		Width:	Hoight.	

Proposed Use ✓ Proposed Structure		Dimensions	Square Footage	
		Principal Structure (first structure on property)	( X )	
	Residence (i.e. cabin, hunting shack, etc.) with Loft		(35 X 46)	1610
			( 7 X 722	154
Residential Use		with a Porch	( /2 x /6 )	192
		with (2 <sup>nd</sup> ) Porch	( ( )	
	with a Deck		( X )	

Width:

Length:

with (2<sup>nd</sup>) Deck X Commercial Use with Attached Garage (24 X 3 ) 79 Z **Bunkhouse** w/ ( $\square$  sanitary, or  $\square$  sleeping quarters, or  $\square$  cooking & food prep facilities) 04 X 341 Mobile Home (manufactured date) X ) Addition/Alteration (specify) ( X ) Municipal Use Accessory Building (specify) X ) Accessory Building Addition/Alteration (specify) X ) Special Use: (explain) П X ) Conditional Use: (explain) X )

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)	Date
Authorized Agent:	Date 9/10/21
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)	
Address to send permit 44405 EAGLE PT DRIVE CABLE, NI 54821	Attach

**Copy of Tax Statement** If you recently purchased the property send your Recorded Deed

X

)

2748

### In the box below: Draw or Sketch your Property (regardless of what you are applying for) **Show Location of: Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road) (4) Show: All Existing Structures on your Property (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (6)Show any (\*): Show any (\*): (\*) Wetlands; or (\*) Slopes over 20% (7)

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

SEE

Description	Measuren	nent		Description	Measuren	nent
Setback from the Centerline of Platted Road	+500	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	76	Feet
Setback from the Established Right-of-Way	1000	Feet	×	Setback from the River, Stream, Creek	16	Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	76	Feet	1/4/4			
Setback from the <b>South</b> Lot Line	052	Feet	IIE.	Setback from Wetland	+100	Feet
Setback from the West Lot Line	66	reet		20% Slope Area on property	✓ Yes	☐ No
Setback from the <b>East</b> Lot Line	30	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	20	Feet		Setback to <b>Well</b>	30	Feet
Setback to Drain Field	25	Feet				
Setback to Privy (Portable, Composting)		Feet				

ATTACHED

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: 2/	-1825	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		-10	70 11 - 4
Permit #: 2/- 0337	Permit Date:	-21		TE - CO
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  □ Yes □ Yes □ Yes □ Yes	ous Lot(s)) 🗹 No	Mitigation Required Mitigation Attached	☐ Yes  No  No  No	Affidavit Required Affidavit Attached Yes No
Granted by Variance (B.O.A.)    Yes   No   Case #:	1 100 1 1,000	Previously Granted by  ☐ Yes -□ No	y Variance (B.O.A.) Cas	e #:
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No	Were Property Line	es Represented by Owner Was Property Surveyed	✓Yes	
Inspection Record: SYAWED	-5-	1		Zoning District ( ) Lakes Classification ( )
Date of Inspection: 10/4/2/ Inspected by:				Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached?  Yes No – (If No they need to be attached.)				
- Baile as proposed	K .			
- octraguires UDC.	Inspections		,	
- Maintain Shareland Va	a talon Both	ard Toppon	es/4 as 101	aured by Gate bus
Signature of Inspector:	,	(7)	and the second	Date of Approval: 1911/11
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗌	Hold For Fees:	

Bayfield County Impervious Surface Calculations \$100 Pd 9-11-21 dak

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high-water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Property Owner(s):		
JOE ELMGREN	_	Tel ( > ),eT
Mailing Address:	CARNER, MY	Property Address
1102 LORRAINE CT	CARNER, MAJ	48025 OLD GRADE ROAD
Legal Description:		Section, Township, Range
1/4,	1/4,	Sec 20 Township 44 N, Range 5 W
Authorized Agent/Contractor		Gov't Lot Lot # CSM# Vol & Page
RICK YERHOT	4	8
Lot(s) # Block(s) #	Subdivision	Town of:
		GRANDVIEW
Parcel ID # (PIN #)		Tax ID# Date:
04-		16348 9/10 /2)

Impervious Surface: An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious. Impervious surface standards shall apply to the construction, reconstruction, expansion, replacement or relocation of any impervious surface that is or will be located within 300 feet of the ordinary high water mark of any navigable waterway on any riparian lot or parcel. Nonriparian lot or parcel that is located entirely within 300 feet of the ordinary high—water mark of any navigable waterway.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of the existing and proposed impervious surfaces on the lot or parcel by the total surface area of that lot or parcel and multiplying by 100. If an outlot lies between the ordinary high-water mark and the developable lot or parcel described in subd. 1. and both are in common ownership, the lot or parcel and the outlot shall be considered one lot or parcel for the purposes of calculating the percentage of impervious surfaces.

**Impervious Surface Standard:** Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high-water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

**Existing Impervious Surfaces:** For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair all impervious surfaces:
- b. Replace existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocate or modify existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance and meets the applicable setback requirements in Section 13-1-32.

#### Dimension

Area (Square Footage)

Existing House		
Existing Accessory Building/Garage		
Existing Sidewalk(s), Patio(s)		
Existing Covered Porch(s), & Deck(s)		
Existing Driveway	366×15	5500
Other Structures		
Proposed Addition/House	35 x 46	1610
Proposed Accessory Building/Garage	24 × 33	792
Proposed Sidewalk(s) & Patio(s)	(px 28 /2x/2	312
Proposed Covered Porch(s) & Deck(s)	7x22 12x/6	346
Proposed Driveway	10×100 22×30	1660
Proposed Other Structures		
Total:		10,220
		/

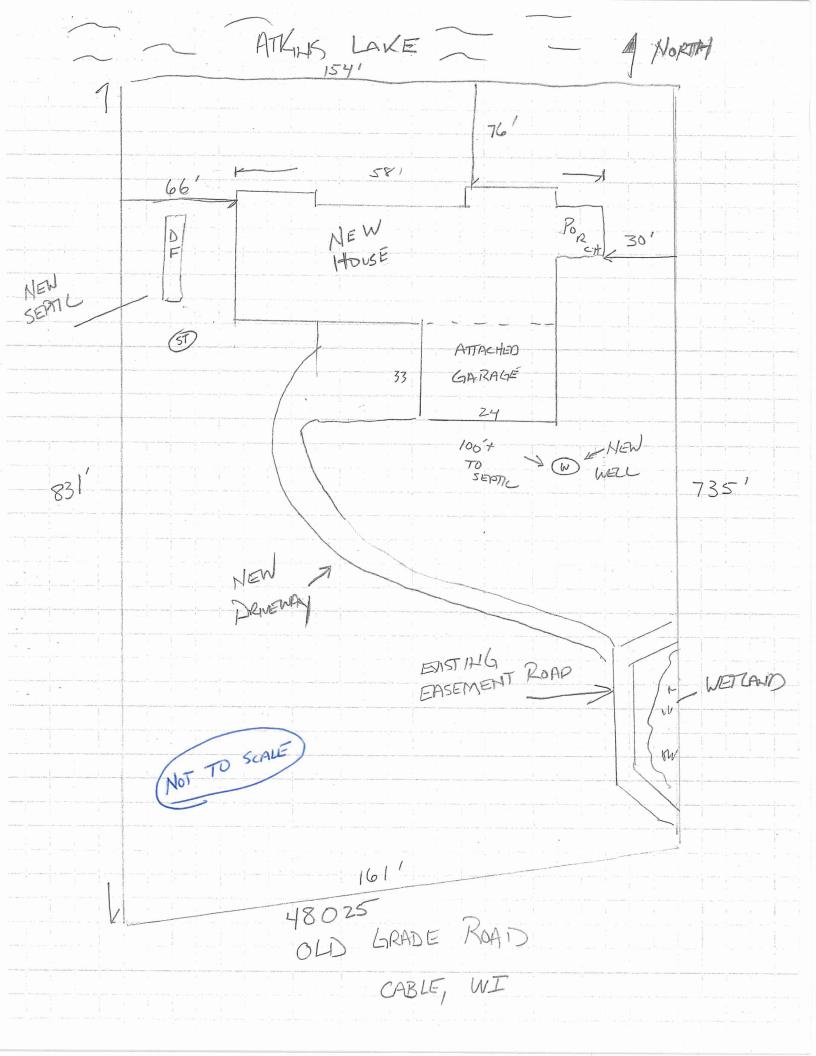
- a. Total square footage of lot: 122,000
- b. Total impervious surface area: 10, 220
- c. Percentage of impervious surface area:  $100 \times (b)/a = 80/0$

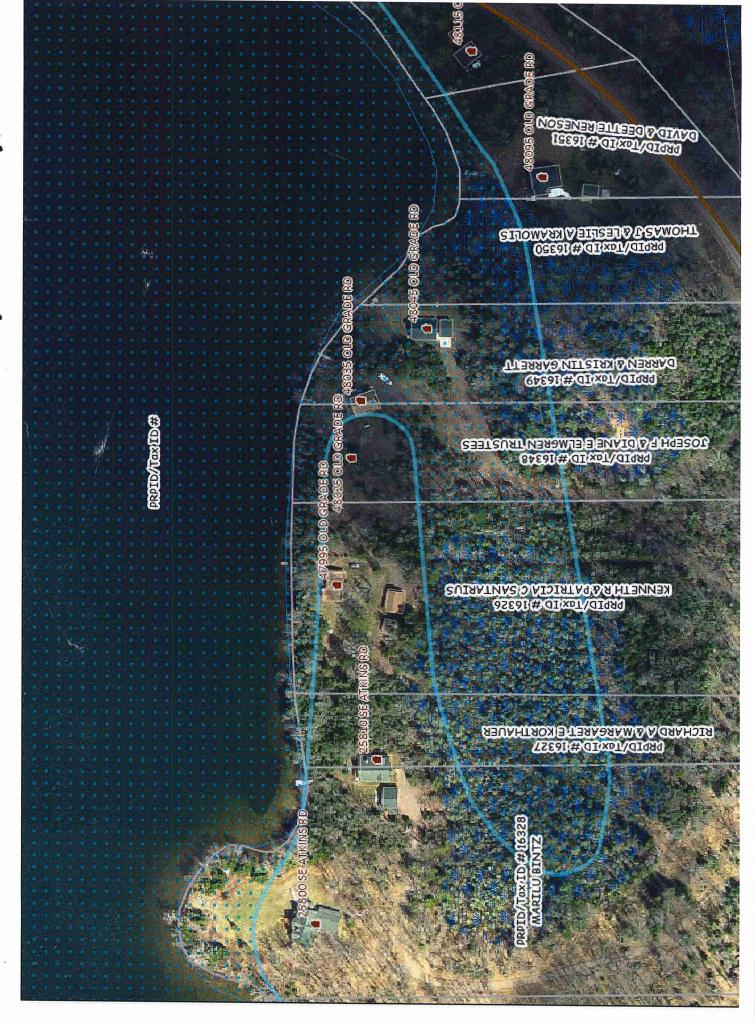
If the proposed impervious surface area is greater than 15% mitigation is required.

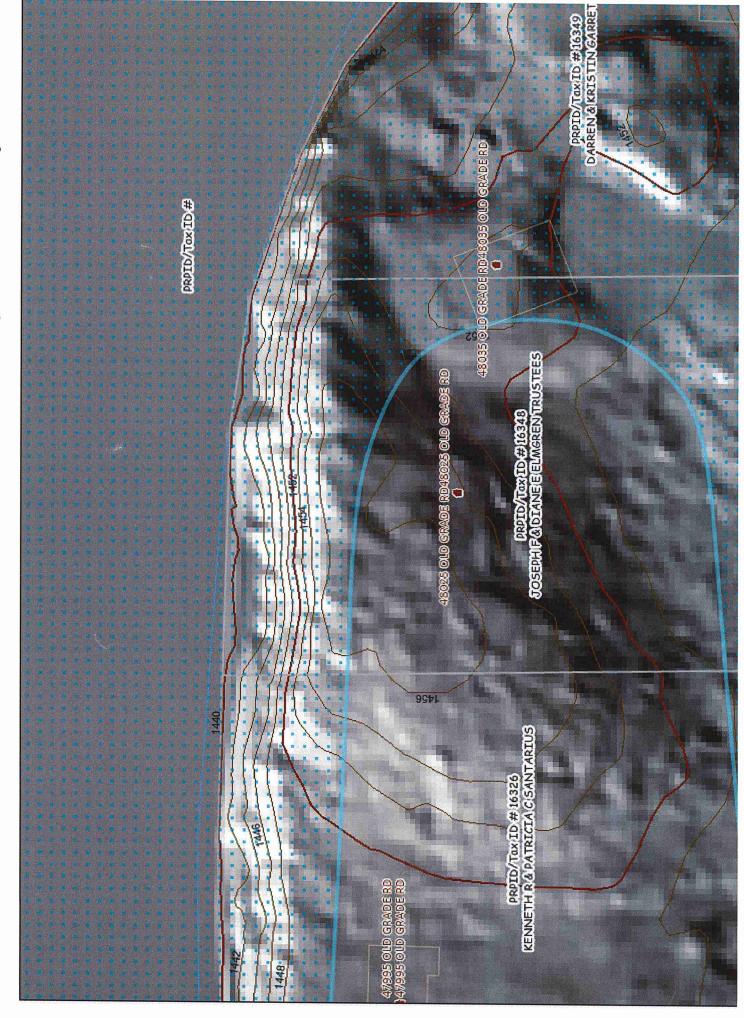
Total square footage of additional impervious surface allowed:

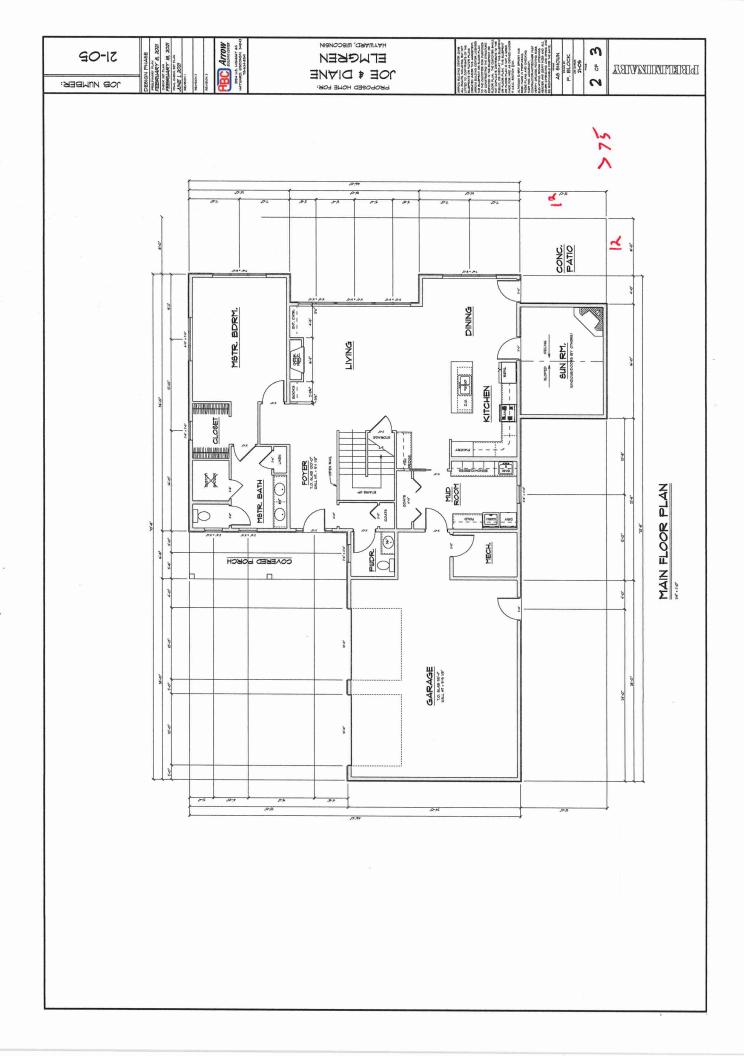
@ 15%	@ 30%
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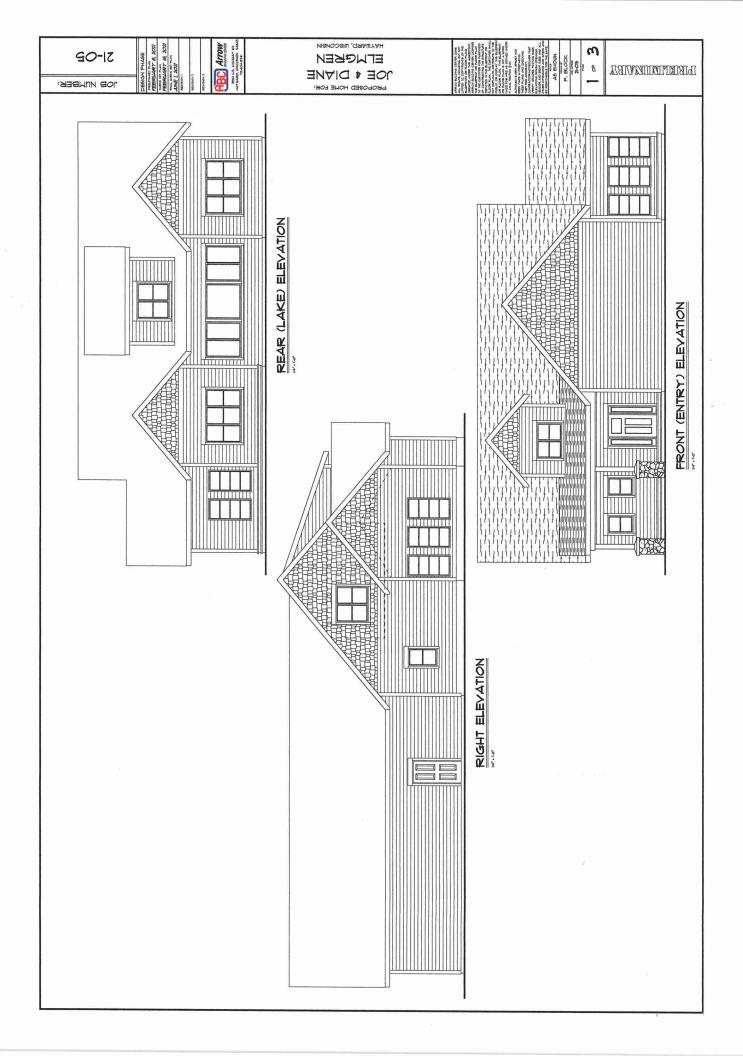
Issuance Information (County Use Only)	Date of Inspection: 10/4/21
Inspection Record:	Zoning District ( R-/ ) Lakes Classification ( )
as required by statelous	Stormwater Management Plan Required:
	□ Yes □ No
Signature of Inspector:	Date of Approval: 196/21

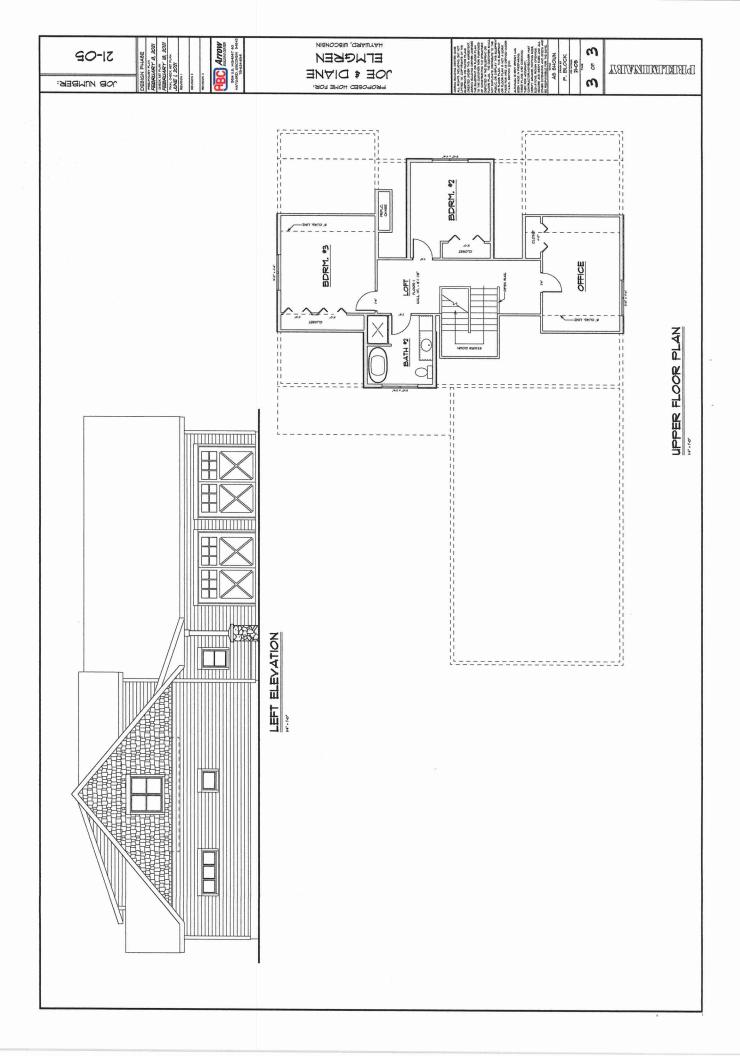


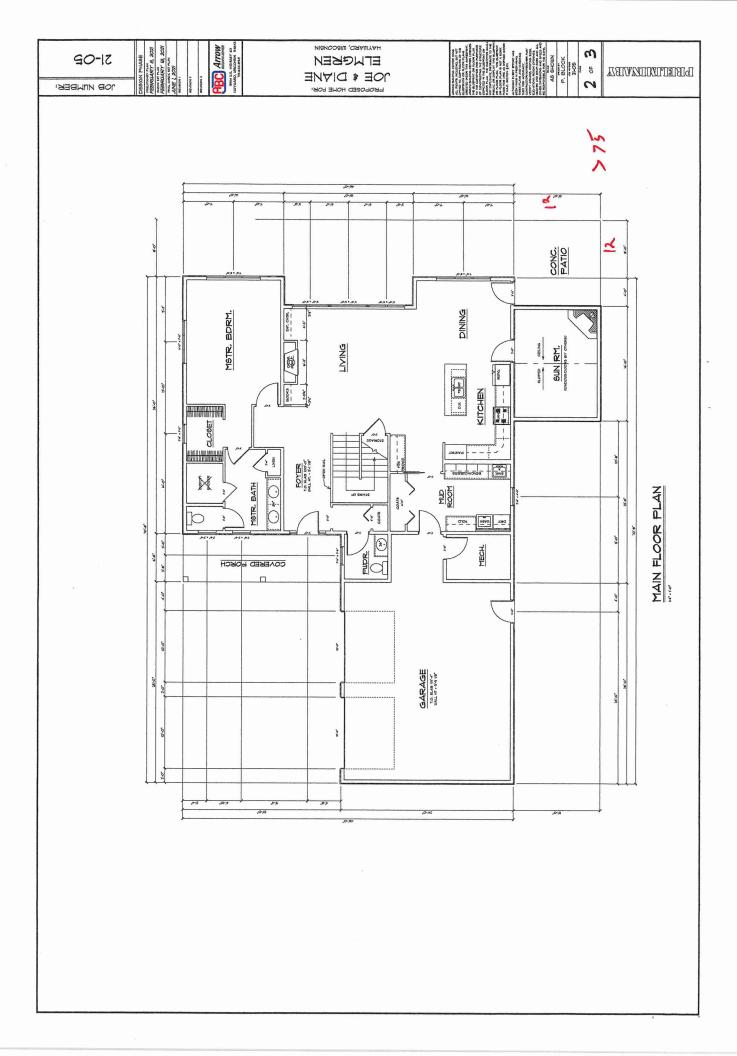












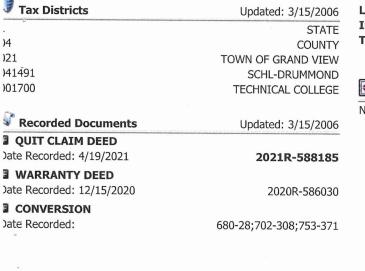
Updated: 4/21/2021

CARVER MN

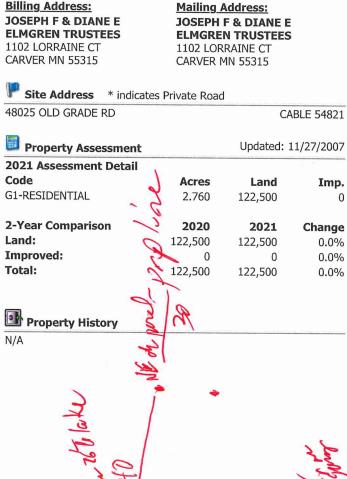
Created On: 3/15/2006 1:15:25 PM

Description	Updated: 4/21/2021
Tax ID:	16348
PIN:	04-021-2-44-05-20-3 05-008-60000
Legacy PIN:	021101606000
Map ID:	
1unicipality:	(021) TOWN OF GRAND VIEW
STR:	S20 T44N R05W
Description:	LOT 1 OF CSM #935 V.6 P.151 BEING A PAR IN GOVT LOT 8 (TOG WITH DRIVEWAY) IN DOC 2021R-588185 (ELMGREN REV TRUST DTD 11/09/2020)
lecorded Acres:	2.760
Calculated Acres:	2.744
.ottery Claims:	0
First Dollar:	No
?oning:	(R-1) Residential-1
:CNI:	114

Tax Districts	Updated: 3/15/2006
	STATE
)4	COUNTY
121	TOWN OF GRAND VIEW
)41491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE
Recorded Documents	Updated: 3/15/2006



Concrete 175
Patio 275
+ TMPENVious



Ownership

JOSEPH F & DIANE E ELMGREN TRUSTEES

I authorize Rick Yerhot to act as our agent for the construction of out new home at 48025 Old Grade Road Cable, WI

griph J. Elwyn

## Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY - X (21-182S) SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

21-0337 **Joseph & Diane Elmgren Trustees** Issued To: No. Town of **Grand View** Location: Township Range 5 20 44 W.  $\frac{1}{4}$  of Section CSM# 935 1 Block Subdivision Gov't Lot Lot For: Residential: [ 2- Story ]; Residence (35' x 46'); Loft (7' x 22') Porch (12' x 16'); Attached Garage (24' x 33') = 2,748 sq. ft. 1 Height of 24' 6" (Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as Proposed. Get required UDC Inspections. Maintain Shoreland Vegetation Buffer and Topography as required by State Laws.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

October 12, 2021

Date

Tracy Pooler, AZA

**Authorized Issuing Official** 

or if any prohibitory conditions are violated.